## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

081149-0109

| Lifective January 1, 2005   |  |                                 |                 |                                       |                        |                                     |                | 001141 010 /      |              |            |            |                        |  |
|---|--|---------------------------------|-----------------|---------------------------------------|------------------------|-------------------------------------|----------------|-------------------|--------------|------------|------------|------------------------|--|
|   |  |                                 | (Column 1)      |                                       | (Column 2)             |                                     | SMALL<br>TYPE  | SMALL ENTITY TYPE |              | OTHER THAN |            |                        |  |
| TOTAL CLAIMS  |  |                                 | 36              |                                       |                        |                                     | RAT            | ĒŢ                | FEE          | 1          | RATE       | FEE .                  |  |
| FOR   |  |                                 | NUMBER FILED    |                                       | NUMBER EXTRA           |                                     | BASIC          | EE                | 375.00       | OR         | BASIC FEE  | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |                                 | 36 minus 20=    |                                       | .16                    |                                     | X\$ 9          | _                 | <del></del>  | OR         |            | 288                    |  |
| INDEPENDENT CLAIMS  |  |                                 | '3, m           | inus 3 =                              | *                      |                                     | X42:           |                   |              | 1          | X84≈       | -00                    |  |
| ML  | JLTIPLE DEPEN                                | NDENT CLAIM P                   | RÉSENT          |                                       | <del></del>            |                                     | }              | +                 | ·            | OR         |            |                        |  |
| * If the difference in column 1 is less than zero, enter "(   |  |                                 |                 |                                       |                        | muluma 0                            | +140           |                   | ·            | OR         | +280=      |                        |  |
|   |  |                                 |                 |                                       |                        | Diulilii Z                          | TOTA           | L                 |              | OR         | TOTAL      | 1038                   |  |
| :=  | C  |                                 |                 | IDED - PART II  (Golumn 2) (Column 3) |                        |                                     | CMAI           | . =               | NTITY        | ΔB         | OTHER      |                        |  |
| П   |  | CLAIMS                          |                 | HIGH                                  |                        | (Column 3)                          | SWAL           |                   | ENTITY       | OR         | SMALL      |                        |  |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT |                 | PREVIO<br>PAID                        | BER<br>DUŞLY           | PRESENT<br>EXTRA<br>                | PATE           |                   | ADDI-<br>FEE | ·          | RATE       | ADDI-<br>TIONAL<br>FEE |  |
| Š   | Total  | . 3                             | Minus           | ئ "                                   | 36                     | =                                   | X\$ 9:         |                   |              | OR         | X\$18=     |                        |  |
| AME   | Independent                                  | · 5                             | Minus           |                                       |                        | -2                                  | X42=           |                   | :            | OR         | X84=       | 200                    |  |
| ــــ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA |                                 |                 |                                       |                        |                                     | +140:          | .†                |              | OR         | +280=      |                        |  |
|   | •  |                                 |                 |                                       |                        |                                     | TOT            |                   |              |            | TOTAL      | 400                    |  |
|   |  | (Column 1)                      |                 | (Colun                                | nn 2)                  | (Column 3)                          | ADDIT. FI      | EL                |              | JON ,      | ADDIT. FEE | 700                    |  |
| _   |  | CLAIMS                          |                 | HIGH                                  | EST                    |                                     | <del></del>    | _                 | ADDI-        |            |            | ADDI-                  |  |
| E.  |  | REMAINING<br>AFTER              |                 | PREVIO                                | USLY                   | PRESENT<br>EXTRA                    | RATE           |                   | IONAL        |            | RATE       | TIONAL                 |  |
| AMENDMENT B   | Total  | AMENDMENT                       | Minus           | PAID                                  | FOR                    |                                     | · }            | +                 | FEE          |            |            | FEE                    |  |
| EN  | Independent                                  |                                 | Minus           | **                                    |                        | =                                   | X\$ 9=         | 1                 |              | OR         | X\$18=     |                        |  |
| Ą   |  | NTATION OF MU                   |                 | ENDENT                                | CLAIM                  |                                     | X42=           |                   |              | OR         | X84≃       |                        |  |
| <b></b> -   | <del></del>                                  | <u></u>                         | +140=           |                                       |                        | OR                                  | +280=          |                   |              |            |            |                        |  |
|   |  | TOTA<br>ADDIT. FE               |                 |                                       | OR                     | TOTAL<br>ADDIT, FEE                 |                |                   |              |            |            |                        |  |
|   |  | (Column 1)                      |                 | (Colum                                |                        | (Column 3)                          |                |                   |              |            |            |                        |  |
| ပ   |  | CLAIMS<br>REMAINING             |                 | HIGHE<br>NUME                         | BER                    | PRESENT                             |                |                   | ADDI-        | •          |            | ADDI-                  |  |
| ENI   |  | AFTER<br>AMENDMENT              |                 | PREVIO                                |                        | EXTRA                               | RATE           | T                 | IONAL<br>FEE | - [        | RATE       | TIONAL                 |  |
| AMENDMENT   | Total  | *                               | Minus           | **                                    |                        | =                                   | X\$ 9=         | †                 |              | OR         | X\$18=     | FEE                    |  |
| ME  | Independent                                  | *                               | Minus           | ###                                   |                        | =                                   | X42=           | +                 |              | Ì          |            | ·                      |  |
|   | FIRST PRESE                                  | NTATION OF ML                   | JLTIPLE DEF     | ENDENT                                | CLAIM                  |                                     | X42=           | +                 |              | OR         | X84≃       |                        |  |
| * 11  | f the entry in colum                         | +140=                           |                 |                                       | OR                     | +280=                               |                |                   |              |            |            |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE  ADDIT. FEE |  |                                 |                 |                                       |                        |                                     |                |                   |              |            |            |                        |  |
| i   | The "Highest Num                             | iber Previously Paid            | d For (Total or | independe                             | iess mar<br>nt) is the | i 3, enter "3."<br>highest number i | found in the a | appro             | priate box   |            |            |                        |  |